

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>M-G</i>		8/30/00
O.I.P.E. CLASSIFIER	<i>W</i>		9-5-00
FORMALITY REVIEW	<i>W</i>	854	10-13-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

..... Rejected N
 Allowed I
 (Through numeral)..... Canceled A
 Restricted O

Non-elected
 Interference
 Appeal
 Objected

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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